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A Case of Pyramido-Zonular Cataract

Illustrated



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A CASE OF PYRAMIDO-ZONULAR CATARACT.*

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(Illustrated.)

In our experience the following case is unique. We regarded it as one of pyramido-zonular cataract occurring in a person of fair general health who exhibited no signs of rhachitis.

Miss B. K., aged 24, unmarried, came to the hospital on September 29, 1908, because of defective sight, and because she had been told she had a cataract. When six months old she had an attack of measles, shortly after which, she said, her mother noticed a white spot in the center of the pupil of the left eye. She had been rather delicate, and had had nearly all the fevers and other diseases of childhood and adolescence. She is the second of five children. Her father died of consumption when she was four years of age, and her mother of hemorrhages seven years ago. She had been examined by a number of oculists; various opinions had been given as to the cause of the opacity, and as to the prognosis in general.

The vision of the right = $6/15$, of the left = $2/60$. There is a slight, very rapid, horizontal nystagmus in the left eye, which is quite pronounced when the pupil has been widely dilated.

When the mydriasis is complete a dense white opacity is seen occupying the anterior pole of the lens, while near the periphery, deeply situated, is a gray irregularly broad ring. This ring has uneven edges and projections, and may be looked upon as a zonular cataract. The central opacity is conical; the apex points anteriorly and appears to be wholly in the substance of the lens. At the base, which is near the nucleus, there are rough projections extending laterally from it. With oblique illumination there appears to be a fine haze of each cornea, and yet, even upon high magnification, no opacity of the cornea can be made out. The vitreous of the left eye is perfectly clear. The disc is oval and extending

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from the upper border is a flame shaped opaque patch of retained nerve fibres. The general refraction is $+7$ D. In the right eye the lens has a very faint haze in it at about the situation of the zone noted in the left. This eye is also highly hyperopic, but it is otherwise healthy and normal. The correcting lenses increase the vision to 5/10 in the right, and to 5/30 in the left.



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These opacities are evidently stationary, and as the acuity of vision is high, we believed that operative interference would be unwarranted at this time.

The drawing made by Miss Washington gives a very good view from oblique illumination, except, in it, the apex of the central opacity appears to point toward the zone, whereas it actually projects straight forward.